

FREEDOM VALLEY SCHOOL - BARDOLI

APPLICATION REGARDING CHANGE OF ADDRESS & CONTACT DETAILS



Please (✓) tick mark the changes required

- | | |
|--|---|
| <input type="checkbox"/> CHANGE OF ADDRESS | <input type="checkbox"/> CHANGE OF RESIDENCE TELEPHONE NO. |
| <input type="checkbox"/> CHANGE OF EMERGENCY / SMS NO. | <input type="checkbox"/> CHANGE OF EMAIL ADDRESS |
| <input type="checkbox"/> CHANGE OF FATHER'S MOBILE NO. | <input type="checkbox"/> CHANGE OF FATHER'S OFFICE TEL. NO. |
| <input type="checkbox"/> CHANGE OF MOTHER'S MOBILE NO. | <input type="checkbox"/> CHANGE OF MOTHER'S OFFICE TEL. NO. |

STUDENT'S PARTICULARS

Student Code No.

Class & Section

Student's Name: _____

DETAILS OF APPLICATION

Note:

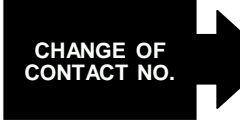
1. Please use only **BLOCK LETTERS**.

2. Do not write any characters outside the block.

W.E.F

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PIN: _____
(Mandatory Field)



RESIDENCE TELEPHONE NO.

EMERGENCY / SMS NO.

EMAIL ADDRESS _____ @ _____

FATHER'S MOBILE NO.

FATHER'S OFFICE TEL. NO.

MOTHER'S MOBILE NO.

MOTHER'S OFFICE TEL. NO.

Signature of Parent

FOR OFFICE USE ONLY

RECEIVED ON

APPLICATION NO.

Changes in SMS Database on

Initial _____